



Rep. Gregory Harris

Filed: 5/29/2018

10000SB1851ham003

LRB100 10394 KTG 41067 a

1 AMENDMENT TO SENATE BILL 1851

2 AMENDMENT NO. _____. Amend Senate Bill 1851, AS AMENDED,
3 with reference to page and line numbers of House Amendment No.
4 2, by replacing line 10 on page 64 through line 11 on page 66
5 with the following:

6 "(c) Notwithstanding any other provision of this Code, if
7 by July 11, 2018 the federal Centers for Medicare and Medicaid
8 Services has neither approved the changes authorized under
9 Public Act 100-581 nor has formally approved an extension of
10 the reimbursement methodologies and payments to hospitals
11 under Sections 5A-12.5 and 14-12 as they are in effect on June
12 30, 2018, then the following shall apply:

13 (1) All reimbursement methodologies and payments for
14 hospital services authorized under Sections 5A-12.2,
15 5A-12.4, and 5A-12.5 in effect on June 30, 2018 shall
16 continue subject to the availability of federal matching
17 funds for such expenditures and subject to the provisions
18 of subsection (c) of Section 5A-15.

1 (2) All supplemental payments to hospitals authorized
2 in Illinois' Medicaid State Plan in effect on June 30,
3 2018, which are scheduled to terminate under Illinois'
4 Medicaid State Plan on June 30, 2018, shall continue
5 subject to the availability of federal matching funds for
6 such expenditures.

7 (3) All assessments imposed under Section 5A-2, as they
8 are in effect on June 30, 2018, shall continue.

9 (4) Notwithstanding any other provision in this
10 subsection (c), the Department shall make monthly advance
11 payments to any safety-net hospital or critical access
12 hospital requesting such advance payments in an amount, as
13 requested by the hospital, provided that the total monthly
14 payments to the hospital under this subsection shall not
15 exceed 1/12th of the payments the hospital would have
16 received under Sections 5A-12.2, 5A-12.4, and 5A-12.5 and
17 subsections (d) and (f) of Section 14-12.

18 Notwithstanding any other provision in this subsection
19 (c), the Department may make monthly advance payments to a
20 hospital requesting such advance payments in an amount, as
21 requested by the hospital, provided that the total monthly
22 payments to the hospital under this subsection shall not
23 exceed 1/12th of the payments the hospital would have
24 received under Sections 5A-12.2, 5A-12.4, and 5A-12.5 and
25 subsections (d) and (f) of Section 14-12.

26 Advance payments under this paragraph (4) shall be made

1 regardless of federal approval for federal financial
2 participation under Title XIX or XXI of the federal Social
3 Security Act.

4 As used in this paragraph (4), "safety-net hospital"
5 means a hospital as defined in Section 5-5e.1 for Rate Year
6 2017 or an Illinois hospital that meets the criteria in
7 paragraphs (2) and (3) of subsection (a) of Section 5-5e.1
8 for Rate Year 2017.

9 As used in this paragraph (4), "critical access
10 hospital" means a hospital that has such status as of June
11 30, 2018.

12 (5) The changes authorized under this subsection (c)
13 shall continue, on the same time schedule as otherwise
14 authorized under this Article, until the effective date of
15 the new and revised methodologies and payments under Public
16 Act 100-581, which shall be the first day of the second
17 month following the date of approval by the federal Centers
18 for Medicare and Medicaid Services."